

The Highland Council

Agenda Item	6
Report No	HSW-03-24

Committee: Health, Social Care and Wellbeing

Date: 14 February 2024

Report Title: Health and Social Care - Revenue Budget Monitoring and Performance Reporting for Q3 2023/24 – 01 October 2023 to 31 December 2023

Report By: Executive Chief Officer Health and Social Care

1. Purpose/Executive Summary

- 1.1 This report provides Members with a revenue monitoring position for Q3 of the current 2023/24 financial year, to the end of December 2023. **Appendix 1** sets out the monitoring forecast.
- 1.2 Members will recall in terms of monitoring reports in 22/23 that a significant underspend was forecast. That underspend amounted to £4m against an annual budget of £181.294m. That underspend continues into 23/24 in terms of the monitoring to date albeit the underspend arises as a result of vacancies and can be balanced against the – currently unallocated – savings target. The expected underspend as at Q3 is £229 000. This position will be expanded upon in the narrative of the report. It should however be noted that there has been some work in terms of the re alignment of the budgets for looked after children to better reflect the current position and that will work continue to support the reporting of the final position.
- 1.3 There is an update on progress with budget saving delivery for 23/24 albeit detail is provided as a narrative within the body of the report. Members will recall that all savings were achieved by the Service in 22/23 and the narrative of the report provides further detail in relation to the anticipated position for 23/24 which is also set out within **Appendix 2**. It is the Service's position that the savings will be achieved in year. The Looked After Children budget lines have delivered savings through Families First and £1m has now been marked as green. The remainder will be taken against vacancies and used to balance the budget but will not be considered as recurrent savings made by the service on an ongoing basis at this stage.
- 1.4 This report also provides performance information on:
 - Corporate Indicators
 - contribution to the Corporate Plan
 - Service Plan progress
 - mitigation of Service Risks
 - Service updates out with the Corporate Indicators or Service Plan
 - An update on the Public Service Improvement Framework (PSIF).

The content and structure is intended to:

- assist Member scrutiny and performance management
- inform decision making to aid continuous improvement
- provide transparency and accessibility

1.5 For the purpose of this report details have been provided from the dashboard showing the latest updates on the HSC Service Plan which was approved by Members at a previous meeting. Information is also included in relation to those indicators which are relevant for Adult Care Services. The Committee will be aware of services delivered by NHS Highland and form part of separate assurance reporting.

2. Recommendations

2.1 Members are asked to:

- i. **Consider** the forecast revenue position as at Q3 of the 2023/24 financial year.
- ii. **Note** the progress update provided in relation to budget savings delivery.
- iii. **Scrutinise** the Service's performance, improvement and risk information.

3. Implications

3.1 **Resource** - The report and Appendices provide an up to date forecast of the financial position, including progress with delivery of savings. There are no specific recommendations at this time with particular implications to highlight. As noted below in the risk section, there remains ongoing uncertainty and challenge in financial forecasting as a result of the current financial crisis. There may also be resource implications in terms of the continuing delivery of adult social care and details in relation to that will be provided to subsequent meetings.

3.2 **Legal** - No particular implications to highlight. This report contributes to the Council's statutory duties to report performance and secure best value in terms of: Section 1(1)(a) of the Local Government Act 1992, and Section 1 of the Local Government in Scotland Act 2003, respectively.

3.3 **Community (Equality, Poverty, Rural and Island)** - The Service continues to respond to service need across our communities, within the resources available, and the ongoing redesign of staffing structures and re-alignment of budgets as a result is with the focus of ensuring the available resources are aligned with Council priorities and service needs.

3.4 **Climate Change / Carbon Clever** - No implications to highlight.

3.5 **Risk** - This report and Appendices reflect best available information and assessment of expected service impacts. There remains the risk of changes in circumstance that may have an adverse variance on financial forecasts. The risk in relation to the adult care service delivered by NHS Highland is ongoing and is likely to result in a projected significant overspend in terms of which is regularly discussed at the Joint Monitoring Committee. The risk in relation to the care home service is set out and referenced within the Council's Corporate Risk Register and remains relevant. The Partnership has also developed its own risk register which will be shared at a subsequent meeting of this Committee but is available online as part of the papers to the JMC. This Committee are also sighted on the risk in relation to recruitment challenges across social work which is a significant contributing factor to the reported underspend. That risk creates a

risk in terms of service delivery which is also reflected in the Council's Corporate Risk Register.

3.6 **Health & Safety (risks arising from changes to plant, equipment, process, or people)** - There are no immediate health and safety implications arising from this report.

3.7 **Gaelic** - No implications to highlight.

4. **Q3 Monitoring Forecast**

4.1 **Appendix 1** sets out the Q3 monitoring position for the current financial year.

4.2 In terms of that position against a budget for the year of £183.935m, an underspend is forecast which is more significant than that expected in Q2. This continues to be contributed to by the position in relation to staff vacancies and the need to deliver savings at £3.138m. The service is confident that a balanced budget will be delivered because of the level of vacancies that persist. It must however be noted that it is the position of the service that these vacancies do not represent a saving but ultimately do contribute to the delivery of a balanced budget. There has however been some work to seek to realign the budgets for looked after children to show the work that the service has done in terms of the Families First policy. That work is aimed at the service being able to deliver a balanced budget in relation to those lines for looked after children which have historically been overspent. That work is continuing and ought to address various re alignments which will be necessary as a result of the strategic imperatives provided for in Families First.

4.3 Members will recall that for 23/24 there is no covid response budget heading and as such the underspend is likely to be less over this financial year notwithstanding the fact that very significant staff vacancies are continuing to lead to significant risk in relation to service delivery as well as contributing to an ongoing underspend. That underspend is predicted to be less than in 22/23 as a result of this but what is key is the reduction of the predicted overspend for Looked After Children and it is these budget lines which are the focus of the Service. The Families First Strategy is intended to improve outcomes in regard to service delivery and will also contribute to reducing what has historically been a significant overspend.

4.4 Members will recall from previous reports, the positive trends being shown in Looked After Children, with it forecast that the number of children in out of authority residential provision was approaching the lowest level it had been at for some years. That work continues and is referred to in detail at paragraph 4.8.3.

4.5 The following sections provide some further narrative relating to service developments which will inform future reporting in terms of anticipated variances.

4.6 Family Teams

4.6.1 Past reports to Committee over recent years have highlighted a legacy underspend against this budget heading. The Committee are aware of actions being taken to (a) address some of the local and national challenges around recruitment, (b) redesign of the service and (c) re-alignment of the budget. The staff vacancies throughout the service are of significant concern and this remains particularly challenging in the Family Teams. The Committee will recall a previous report in relation to that associated risk which continues and is now reflected in the Corporate Risk Register. It is intended that

the budget realignments referred to earlier in this report will reflect the shift towards the strategies developed not only by Families First but also as envisaged by the Whole Family Wellbeing Approach. This is part of the ongoing redesign being carried out by the service.

4.7 Fostering, Kinship and Adoption

- 4.7.1 Members will recall that there has been a review of allowances in relation to the payment of foster carers and Kinship carers in acknowledgement that allowances have not increased for many years and as a result, this has had negative impacts on recruiting and retaining foster carers in particular. The Committee should be aware that this issue has also received national attention in that the Scottish Government agreed in October 2023 to set a National Minimum Allowance across Scotland (back dated to April 1st 2023) to be paid to foster carers and kinship carers. This also included those in receipt of adoption or residence allowances paid by Local Authorities. Though the Committee had agreed to increase allowances in early 2023 there was still a gap between what the Local Authority has been paying and the National Minimum Allowance set by the Scottish Government for three of the age groups. Funding has been agreed by the Scottish Government of £16m to help Local Authorities meet the shortfall, Highland Council has been advised they were to receive £621k to offset the costs of the increase in allowances.
- 4.7.2 The use of local – Highland – provision is a key part of the Family First strategy in terms of seeking to keep children in their communities. It is intended that this strategy will – as well as improving outcomes for children and young people who are looked after – also contribute to savings by reducing reliance on purchased placements out of Highland which come at an increased cost. Meantime in terms of reporting positive trends the increase in allowances for Kinship Carers has meant that more family members are able to afford to take on the care of their younger relatives. There has also been an increase in the number of Kinship Orders being granted which not only legally secures the children with their kin but also has a positive impact on the budget spend. At the end of December, we were supporting 124 children where there is a Kinship order in place. There are currently also 83 children placed with Kinship carers - that is to say those young people who remain looked after but in a kinship placement - and that number is up by one this quarter. Members ought also be aware that the kinship process is currently handled within the Families Teams and it is intended going forward that this be picked up and included within the Adoption and Fostering budgets to reflect the position that these lines are in relation to children being looked after outwith their immediate birth families.
- 4.7.3 In terms of fostering placements out with Highland there had been no placements with Independent Fostering providers since September 2022 until June 2023 when three such placements were made which was reflective of what is a busy time being the school holiday period. There has been one further placement in Highland in November with an Independent Fostering provider of a 15-year-old young person. Since June 2023, three young people have moved from the Independent Fostering Providers to other care arrangements such as foster care, kinship care and home. There are a further 6 children where adoption is the plan who are currently in independent fostering placements and those adoption orders will hopefully be granted this year. The number of young people placed with Independent Fostering Providers both within and out with Highland is 47. This is a positive trend consistent with the Family First Strategy, and it is anticipated will lead to a reduction in what has historically been an overspend and this is reflected in the reported figures.

4.7.4 In terms of recruitment of foster carers, it should be noted that there has been an increase in terms of enquiries which have progressed to assessments for fostering and a steady number of enquiries and applications for those interested in adoption. This is also a positive contribution in terms of keeping children in Highland Communities. In 23/24, there have been eight new approvals of Foster Carers/Prospective Adopters.

4.7.5 The position in relation to external residential provision is included within the narrative in relation to Looked After Children below.

4.8 Looked After Children

4.8.1 'The Promise' is at the heart of practice within Highland Council. Consequently, there has been a focus on shifting the balance of care so that children and young people remain at home – when safe to do so. This is reflected in the Family First strategy reflected above.

4.8.2 That vision to safely keep children within their families and communities is achieving impact with less children coming into the statutory social work system. This is evidenced through our 'Looked After Children' statistics over a 3-year trend. From 2020 to 2022/23 there has been an 18-20% reduction in Looked After Children from **495** (2020), **469** (2021), **402** (2022) and **405** (2023). That figure is now at **416** having risen from 415 to 425 over quarter 2 and has now reduced again. It is the aspiration of the service to keep children from being considered as looked after whilst of course continuing to ensure that their safety and wellbeing is properly ensured.

4.8.3 In terms of those children and young people in residential placements out with the Highland area, the outlook is extremely positive. There are currently 11 children (down from 23 last year and up 2 from 9 last quarter) outwith the Highland area in spot purchased placements. There are 18 children in total both in and out of Highland. Last quarter was the lowest number of OOA placements ever and a result of significant, continuous effort by the Home to Highland team and the family teams. It is hoped that a further 2 children will move back from OOA placements this financial year. Last quarter was the lowest number of OOA placements ever and a result of significant, continuous effort by the Home to Highland team and the family teams. This will have a positive effect on the budget spend as well as improving outcomes and it is expected that those trends will be shown in reported variances on an ongoing basis.

4.8.4 Whilst the trends in relation to residential placements is positive and it is anticipated that it will result in savings it should be noted that whilst the overall numbers are decreasing, the cost of living crisis is such that in real terms the cost of individual placements is significantly increasing. Consequently, we will be monitoring this situation closely and update Committee accordingly.

4.9 Commissioned Adult Services

4.9.1 There have been significant funding streams made available in terms of adult social care which reflect the ongoing pressures in service delivery in that sector which have been recognised by Scottish Government in terms of extra funding. Such extra funding is said to continue into 24/25. Further funding has been made available to deal with particular winter pressures and that funding will be passported directly to NHS Highland as the lead agency. The Committee will be aware that the delivery of adult social care and the associated funding is discussed at the Joint Monitoring Committee, and that there remain regular and ongoing discussions on financial matters between Senior Officials within both organisations. Due to current significant pressures within adult

social care, close budget monitoring is actively being pursued to identify and address potential budget pressures before year end. It is understood that the current savings required in order to deliver adult services in budget is £4.1m and there are active and ongoing discussions with NHS Highland in terms of how that might be delivered as at the present time it is not anticipated that this cost improvement programme will be delivered. Members will recall that the NHH budget for 23/24 was set based upon a drawdown of £9.8m from reserves held by the Council on behalf of NHH. It would be expected to fully exhaust that reserve and as such is a significant factor regarding the next financial year when the position is likely to be very challenging. The Committee should also be aware of the Strategic Plan which has recently been agreed by the Partnership and its aim is to seek to shift the balance of care such that more adults in need of support are enabled to remain in their homes and communities longer. It is anticipated that as well as improving outcomes for such adults that such a strategy ought also deliver efficiencies which are required in order to balance the budget in this area.

5. Budget Savings Delivery

- 5.1 In relation to progress with delivery of budget savings for 23/24 the Committee should refer to **Appendix 2**.
- 5.2 In relation to Q3 the Committee should note progress in terms of Appendix 2. To date savings of £0.222m are marked as achieved which leaves £2.9m still to be allocated. In terms of the reported figures in Appendix 1, the Committee should note too that sum is reported as amber in terms of the saving line. The Service will deliver a balanced budget as a result of the level of vacancies. That is not to say that there is no progress in terms of the delivery of those savings and members should note the detail in Section 4 in terms of positive progress in terms of outcomes achieved – and expected linked savings – as a result of the ongoing work in relation to Families 1st Strategy. It is expected that work will ultimately be shown in terms of allocation of savings in terms of the currently underspent budget lines for residential childcare and Fostering and Adoption. Any savings not so achieved will be allocated against vacancies but the Committee should note that savings taken against vacancies will not be achieved from recurrent savings made by the service.
- 5.3 In terms of efficiency savings, the Service is continuing to aim for a 1.5% budget reduction across all budgets that all managers are responsible for. There are also expected to be some savings in terms of staffing which will be crystallised as the ongoing recruitment drive progresses and will be reflected in the variances and are shown as achieved in **Appendix 2**.

6. Service Performance – Corporate Indicators

- 6.1 Service performance in relation to Absence, Complaints, FOIs, and Invoice Payments are set out in the following sub-sections.

6.2 Service Attendance Management

Staff absence is a nationally benchmarked indicator. Effective absence management supports staff, maintains productivity, and contributes to the Council's benchmarked performance. In Q2 2023/24, the Service lost an average of 2.56 days per employee compared to an average of 2.08 for the Council as a whole.

Health and Social Care

Average number working days per employee lost through sickness absence

Average Days Lost	Q3 21/22	Q4 21/22	Q1 22/23	Q2 22/23	Q3 22/23	Q4 22/23	Q1 23/24	Q2 23/24
Health and Social Care	1.59	1.69	2.05	2.04	2.27	2.87	2.82	2.56
Highland Council	1.83	2.22	2.24	1.58	1.89	2.88	2.48	2.08

Please note that Qtr. 3 was not yet available at the time of writing this report.

6.3 Service Complaints Response Times

Monitoring complaints provides important feedback which can facilitate decision making and service design. Services are responsible for responding to complaints which are issued on their behalf by the Customer and Resolution Improvement Team ('CRIT').

Performance for complaints during Q2 against a corporate target of 80% was as follows:

Complaints - Health and Social Care

Number of closed complaints and the % compliant with the legislative timescale

Frontline Resolution within 5 days

	Q3 21/22		Q4 21/22		Q1 22/23		Q2 22/23		Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24	
Health and Social Care	6	67 %	4	50 %	2	0 %	6	100 %	2	100 %	3	67 %	2	100 %	3	100 %
Highland Council	207	62 %	161	62 %	170	61 %	163	90 %	137	93 %	101	90 %	160	92 %	135	79 %

Investigation Resolution within 20 days

	Q3 21/22		Q4 21/22		Q1 22/23		Q2 22/23		Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24	
Health and Social Care	5	60 %	7	29 %	3	33 %	14	36 %	9	33 %	8	13 %	6	67 %	9	44 %
Highland Council	68	54 %	48	44 %	65	46 %	54	31 %	49	47 %	63	41 %	97	63 %	85	49 %

Escalated Resolution within 20 days

	Q3 21/22		Q4 21/22		Q1 22/23		Q2 22/23		Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24	
Health and Social Care	2	0 %	2	50 %	4	0 %	3	33 %	1	0 %	1	0 %	3	0 %	3	33 %
Highland Council	45	51 %	57	37 %	38	18 %	34	32 %	22	36 %	15	33 %	32	50 %	32	41 %

Please note that Qtr. 3 was not yet available at the time of writing this report.

6.4 Service Freedom of Information ('FOI') Response Times

FOI requests are co-ordinated by CRIT in collaboration with the Service teams which may hold information relevant to the request.

The performance for FOI response times during Q2 against a corporate target of 90% was as follows:

Freedom of Information Requests - Health and Social Care

% of FOIs closed compliant with the legislative timescale

% FOIs Compliant - Health and Social Care	Q3 21/22		Q4 21/22		Q1 22/23		Q2 22/23		Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24	
		36	86 %	28	93 %	48	73 %	25	84 %	34	76 %	40	83 %	25	92 %	25

% FOIs Compliant - Highland Council	Q3 21/22		Q4 21/22		Q1 22/23		Q2 22/23		Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24	
		414	84 %	400	76 %	462	73 %	364	82 %	478	81 %	536	75 %	399	84 %	333

Tables display the number of FOIs closed within the quarter and % of those that were compliant with the legislative timescale (20 working days) for the service and the Highland Council overall. The Scottish Information Commissioner requires the Council to achieve a minimum compliance rate of 90%.

Please note that Q3 was not yet available at the time of writing this report.

6.5 Service Invoice Payment Times

Payment of invoices within 30 days of receipt is a Council Statutory Performance Indicator. The Council also monitors the number of invoices paid within 10 days of receipt.

The performance for invoice payment times within 30 and 10 days during Q2 against a target of 95% and 77%, respectively, was as follows:

Health and Social Care - Invoice Payments

Invoice Payment within 30 days	Q3 21/22	Q4 21/22	Q1 22/23	Q2 22/23	Q3 22/23	Q4 22/23	Q1 23/24	Q2 23/24
Health and Social Care	92.4 %	94.0 %	97.6 %	97.5 %	97.5 %	96.3 %	98.6 %	97.9 %
Highland Council	94.2 %	89.1 %	94.1 %	94.2 %	95.1 %	94.9 %	95.1 %	96.7 %

Invoice Payment less than 10 days	Q3 21/22	Q4 21/22	Q1 22/23	Q2 22/23	Q3 22/23	Q4 22/23	Q1 23/24	Q2 23/24
Health and Social Care	74.7 %	59.4 %	92.5 %	91.7 %	85.8 %	83.2 %	93.5 %	90.0 %
Highland Council	67.8 %	53.1 %	67.5 %	73.4 %	70.4 %	71.6 %	72.8 %	80.9 %

Please note that Q3 was not yet available at the time of writing this report.

7. Service Contribution to the Corporate Plan

- 7.1 The full Corporate Plan, “Our Future Highland”, can be viewed on the Highland Council website. It sets out how the Council will achieve the Council programme for 2022-27 and is reviewed annually. The Service’s contribution to the Corporate Plan is set out below, along with commentary for any indicators making no significant progress for Q3 2023/24. For some indicators information is not yet available for 2022/23.

Health and Social Care - PIs in Corporate Plan

PIs/Actions in the Corporate Plan	Period	Data	Period	Data	Period	Data
% of Children and Young People in formal kinship care CP1.08	FY 20/21	22.7 %	FY 21/22	19.1 %	FY 22/23	18.4 %
% of Children and Young People in care in the community CP1.08 CHN09	AY 20/21	85.39 %	AY 21/22	83.83 %	AY 22/23	
Establish a pilot funded by Whole Family Wellbeing Fund in Lochaber CP1.08	Q1 23/24	On Target	Q2 23/24	On Target	Q3 23/24	On Target
No. of H&SC staff trained in Solihull Approach - begins 2023/24 CP1.08	FY 20/21		FY 21/22		FY 22/23	
The average number of children and young people accommodated outwith Highland - Annual CP1.08	FY 20/21	28	FY 21/22	24	FY 22/23	20
The number of foster carer approvals - annual CP1.08	FY 20/21	16	FY 21/22	13	FY 22/23	8
Establish 4-yr pilot project re Non-Fatal Overdoses in Inverness CP1.09	Q1 23/24	On Target	Q2 23/24	Some Slippage	Q3 23/24	Some Slippage
Direct payments spend on 18+ adults CP2.05 SW02	FY 20/21	6.63 %	FY 21/22	7.46 %	FY 22/23	7.25 %
% of people aged 65+ with long-term care needs receiving personal care at home CP2.05 SW03a	FY 20/21	55.57 %	FY 21/22	55.76 %	FY 22/23	52.92 %
HC and NHS develop strategic proposal to reduce no. residents in Residential Care Homes CP3.05	Q1 23/24	On Target	Q2 23/24	Some Slippage	Q3 23/24	Completed
ERDs being completed - HSC CP5.01	Q1 23/24	On Target	Q2 23/24	On Target	Q3 23/24	On Target

7.2 Foster Carer Approval – Revised Target

At the last meeting, Members were advised that due to on-going national and local challenges with the recruitment and retention of Foster Carers, a new more realistic yet achievable stretch target will need to be set. The current target is 16 per annum with only 8 being recruited in FY 2022/23 and 13 in the previous year.

Although recruitment is ongoing and year-round, it continues to be a challenge to replace those who cease fostering, mainly due to retirement, changes in employment, health and family circumstances. The Covid pandemic also impacted on fostering enquires with less people interested in fostering and more people interested in adoption. A trend that is the experience of many other Local Authorities across Scotland and continues to be so. Members are asked to agree that a new target of 10 per annum should be set for FY 2023/24 and future years thereafter.

8. Service Plan Progress

- 8.1 In terms of the Service Plan for the Health and Social Care Service there are several actions and indicators which are considered regularly by officers to monitor service performance. Members will note that these indicators relate to the delivery of children’s services (both social work services and the commissioned Child Health Service) as well as the Justice Service and the Mental Health Officer Service which sit within the Highland Council. Further indicators in relation to the service’s workforce development and quality assurance are also included. This detail which is recorded on the Council’s Performance and Risk Management System (PRMS) is included as **Appendix 3** to this Report.

8.2 Adult Care Services are delivered by NHS Highland and there are 3 specific SPIs which are formally reported upon. These indicators are also included in the Corporate Plan and have recently been updated. Details in relation to those are included at **Appendix 3**.

8.3 **Direct Spend on 18+ Adults**

This indicator and the following are both linked to the outcomes set out in the Strategic Plan which has recently been developed for adults. One of its key drivers is to promote independence and choice making people the centre of the care that they require, On that basis the service – delivered by NHS Highland – is looking to expand the use of all Self Directed Support options and there is a programme of work ongoing with a view to delivering that and hence leading to an improved performance in terms of this indicator.

8.4 **% of people aged 65+ with long-term care needs receiving personal care at home**

As referenced above the Strategic Plan has as its vision the role of communities and the aspiration that as many adults as possible – both under and over 65 – with a long term care need are able to receive personal care at home. This is in general referred to as shifting the balance of care and it is a key aim of the Strategic Plan. In order to deliver upon this element of the plan it will be necessary to consider various strategies aimed at supporting this including, for example, increased use of telecare and other early intervention strategies.

9. **Public Service Improvement Framework (PSIF)**

9.1 In 2022 the Council adopted the Improvement Service's Public Service Improvement Framework (PSIF). PSIF is a self-assessment approach to support improvement in organisations. This structured approach enables a systematic, objective, and comprehensive review of activities and results. It should also be noted that PSIF has been adopted by a number of Scottish Councils.

9.2 A PSIF Self-Assessment of the Health and Social Care Senior Management Team (SMT) has been completed. This involved each member of SMT completing a self-assessment questionnaire. The results were collated and reviewed at a Consensus Session. Six key areas for improvement were identified and an Improvement Plan agreed following an Improvement Planning Session.

9.3 The six areas for improvement which form the basis of the Improvement Plan are...

- Service Planning – creating a set of measurable Customer Service Standards.
- Staff - appropriate induction and training for new staff and for those changing roles and refresher training for current staff.
- Partnerships and Resources – an up-to-date Register to enable the Service to manage assets and other resources securely, efficiently and effectively.
- Process and Services – the Service identifies patterns from complaints and comments through its complaints procedure and uses this information to improve services, publicising action taken.
- Leadership - leaders drive transformational change, are clear about transformation projects within the Council and the service and how they are aligned with organisational priorities and plans.
- Results - performance information is presented in an easy and accessible way for staff and other stakeholders.

9.4 The Improvement Plan will be regularly reviewed by SMT to make sure that the Actions are delivered and agreed outcomes achieved.

10. Service Risks Mitigation

10.1 The Service maintains a Service Risk Register. These risks, their current risk ratings and Q3 2023/24 mitigation status are shown in **Appendix 4**. A full review of the Service Risk Register was carried out in December 2023 and is currently being finalised and updated in PRMS. Changes will be reflected in the next Quarterly Report to Members.

Designation: Executive Chief Officer Health and Social Care

Date: 23 January 2024

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Appendices: Appendix 1 - Q2 Monitoring Forecast
Appendix 2 – Progress against Savings
Appendix 3 – Service Plan and Adult Social Care SPIs
Appendix 4 – Service Risks

HEALTH, WELLBEING AND SOCIAL CARE SERVICE

2023/2024													
Quarter 3, April to December													
	GROSS EXPENDITURE			GROSS INCOME			NET TOTAL			VARIANCE ANALYSIS			
	£'000 Annual Budget	£'000 Actual YTD	£'000 Year End Variance	£'000 Annual Budget	£'000 Actual YTD	£'000 Year End Variance	£'000 Annual Budget	£'000 Actual YTD	£'000 Projected Outturn	£'000 Staffing Variance	£'000 Other Variance	£'000 Income Variance	£'000 Total Variance
BY ACTIVITY													
Service Management and Support													
Management Team	978	751	27	0	0	0	978	751	1,005	-2	29	0	27
Business Support	1,489	916	-231	0	0	0	1,489	916	1,258	-205	-26	0	-231
COVID-19 Response	0	0	0	0	-108	0	0	-108	0	0	0	0	0
Adult Services													
Commissioned Adult Services	137,695	87,760	0	0	0	0	137,695	87,760	137,695	0	0	0	0
Mental Health Teams	1,729	1,178	-157	0	-73	0	1,729	1,104	1,572	-131	-26	0	-157
Criminal Justice Service	5,004	3,165	0	-4,929	-3,369	0	75	-204	75	0	0	0	0
Other Services for Vulnerable Adults	1,509	1,338	-9	-23	-11	0	1,486	1,327	1,477	-15	6	0	-9
Looked After Children													
Fostering & Adoption	6,986	5,287	-70	0	-1	0	6,986	5,286	6,916	-90	20	0	-70
Residential, In house	2,826	2,352	8	0	-760	0	2,826	1,592	2,834	-55	63	0	8
Respite, In house	1,722	1,398	73	0	0	0	1,722	1,398	1,795	93	-20	0	73
Independent and 3rd Sector placements	7,913	5,913	62	0	0	0	7,913	5,913	7,975	0	62	0	62
Through care & aftercare	1,958	1,010	-720	0	0	0	1,958	1,010	1,238	64	-784	0	-720
Home to Highland	6,135	4,156	-146	-401	-307	0	5,734	3,849	5,588	39	-185	0	-146
LAC Management and Support	784	383	-204	0	0	0	784	383	580	-207	3	0	-204
Family Teams													
Family Teams - North	3,257	2,383	-225	0	-1	-1	3,257	2,382	3,031	-240	15	-1	-226
Family Teams - Mid	3,674	2,819	-149	0	-10	0	3,674	2,809	3,525	-245	96	0	-149
Family Teams - West	3,286	2,241	-348	0	-2	-2	3,286	2,239	2,936	-338	-10	-2	-350
Family Teams - South	8,939	6,492	-659	-15	-4	-1	8,924	6,488	8,264	-740	81	-1	-660
Self Directed Support (Direct Payments)	405	287	142	0	0	0	405	287	547	0	142	0	142
Other Services for Children													
Child Protection	955	648	-97	-124	-226	0	831	422	734	-87	-10	0	-97
Health and Health Improvement	1,524	1,030	-8	-658	-423	0	865	607	857	-10	2	0	-8
Allied Health Professionals	3,846	2,937	8	-11	-82	0	3,835	2,856	3,843	5	3	0	8
Primary Mental Health Workers	607	454	13	0	0	0	607	454	620	17	-4	0	13
Specialist Services	401	297	0	0	0	0	401	297	401	0	0	0	0
Youth Action Services	1,738	1,051	-421	0	-9	0	1,738	1,042	1,317	-402	-19	0	-421
Other Services for Children	917	973	-14	-7	0	7	910	972	903	-17	3	7	-7
Staff Training	185	73	-23	0	-4	0	185	70	162	-30	7	0	-23
Independent Funds	0	-15	0	0	0	0	0	-15	0	0	0	0	0
Unallocated Savings	-2,916	0	2,916	0	0	0	-2,916	0	0	2,916	0	0	2,916
Commissioned Children's Services income from NHS													
	0	0	0	-11,274	-6,088	0	-11,274	-6,088	-11,274	0	0	0	0
TOTAL	203,547	137,277	-232	-17,443	-11,479	3	186,104	125,798	185,875	320	-552	3	-229

HEALTH, WELLBEING AND SOCIAL CARE REVENUE MONITORING - 2023-24

	£'000 Annual Budget	£'000 Actual YTD	£'000 Projected Outturn	£'000 Year End Variance
2023/2024				
Quarter 3, April to December				
BY ACTIVITY				
Service Management and Support				
Management Team	978	751	1,005	27
Business Support	1,489	916	1,258	-231
COVID-19 Response	0	-108	0	0
	2,467	1,559	2,263	-204
Adult Services				
Commissioned Adult Services	137,695	87,760	137,695	0
Mental Health Teams	1,729	1,104	1,572	-157
Criminal Justice Service	75	-204	75	0
Other Services for Vulnerable Adults	1,486	1,327	1,477	-9
	140,985	89,987	140,819	-166
Children's Services				
Looked After Children	27,922	19,431	26,925	-997
Family Teams	19,546	14,204	18,303	-1,243
Other Services for Children	6,458	6,704	8,839	2,381
Commissioned Children's Services Income from NHS	-11,274	-6,088	-11,274	0
	42,652	34,251	42,793	141
TOTAL HEALTH, WELLBEING AND SOCIAL CARE	186,104	125,797	185,875	-229
	£'000 Annual Budget	£'000 Actual YTD	£'000 Projected Outturn	£'000 Year End Variance
BY SUBJECTIVE				
Staff Costs	42,128	31,027	42,448	320
Other Costs	161,419	106,250	160,867	-552
Gross Expenditure	203,547	137,277	203,315	-232
Grant Income	-17,425	-11,467	-17,425	0
Other Income	-18	-12	-15	3
Total Income	-17,443	-11,479	-17,440	3
NET TOTAL	186,104	125,798	185,875	-229

Appendix 2

Category	Ref	Service	Type	Saving Description	Agreed Saving £m	Describe the actions progressed to implement the saving	Does this conclude saving implementation on YES/NO	What further actions will be taken forward to deliver the saving?	Are there risks and issues relating to achieving the saving amount in 23/24, describe these?	What remedial action or mitigations are proposed?	What value of saving do you forecast for 23/24 (to capture any variation - more or less - than what was agreed by Council)	BRAG status	Comments for Committee Report
Reducing Waste/Avoidable Spend	1.3b	HW&SC	Staffing	Family Teams - Reduce agency use (currently being used for vacant permanent posts). Replace with permanent post;and/or delete post; and/or reassess gradings where appropriate.	0.300		partial					A	
Service Redesign and Efficiency	3.2	HW&SC	Non-Staffing	Health and Social Care Redesign	1.400		partial		any underachievement in year will be offset by underspends elsewhere in the budget			A	
Service Redesign and Efficiency	3.2	HW&SC	Non-Staffing	Health and Social Care Redesign	1.000		partial					G	
Service Redesign and Efficiency	3.18	HW&SC	Staffing	Family First Strategy	0.248		partial		any underachievement in year will be offset by underspends elsewhere in the budget			A	
Service Redesign and Efficiency	3.19	HW&SC	Staffing	Health and Social Care	0.190	Senior management savings	yes	N/A - identified and delivered	N/A - taken from restructure	N/A	0.190	G	

Appendix 3

Health & Social Care Service Plan 2023/24 – Actions and Measures

Health and Wellbeing Q3 23/24						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
% referrals to Family Nurse Partnership programme	M8 23/24	86.1 %	M9 23/24	84.9 %	85.0 %	
Develop and deliver early health protection, prevention and promotion initiatives for Early Years [Health]	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 23/24
Increase Health Behaviour Change Activity in line with Public Health Data	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 23/24
Transform the role of school nurses with 80% of our workforce qualified to Advance Practitioner level	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q1 24/25

Highland Health and Social Care Partnership Q3 23/24						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
Direct payments spend on 18+ adults CP2.05 SW02	FY 21/22	7.46 %	FY 22/23	7.25 %	8.70 %	LGBF update - due December
% of people aged 65+ with long-term care needs receiving personal care at home CP2.05 SW03a	FY 21/22	55.76 %	FY 22/23	52.92 %	61.69 %	LGBF update - due December
HC and NHS develop strategic proposal to reduce no. residents in Residential Care Homes CP3.05	Q2 23/24	Some Slippage	Q3 23/24	Completed		Strategic Plan agreed by July 23
Highland HSCP: supporting delivery of future Adult Social Care	Q2 23/24	On Target	Q3 23/24	Completed		Due to complete final plan Q3 23/24

Integrated Children's Services Plan [ICSP] Q3 23/24						
Actions being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
Establish a pilot funded by Whole Family Wellbeing Fund in Lochaber CP1.08	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q2 23/24
Develop a performance matrix to evaluate the Whole Family Wellbeing Programme	Q2 23/24	No Significant Progress	Q3 23/24	No Significant Progress		Due to complete Q4 23/24
Develop early intervention and preventative services with 3rd sector	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 23/24
Establish the Children's Rights and Participation Team	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 23/24
Guidelines for changing the language of care	Q2 23/24	Some Slippage	Q3 23/24	On Target		Due to complete Q4 23/24
Improvement measured against the ICS Planning Board's Performance Management Framework	Q2 23/24	On Target	Q3 23/24	On Target		Reported Annually
Introduce Family Group Conferencing - due to start Q3 22/23	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q3 23/24
Listen to the Voices of Families through the evaluation of annual family feedback	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q3 23/24
Listen to the Voice of Families involved with Tier 3 Acute Medical Dietetic Services	Q2 23/24	On Target	Q3 23/24	On Target		Due for review Q4 23/24
Provide leadership and support to the Whole Family Wellbeing Programme	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 23/24
Report on changing the language of care across Highland Council	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 23/24
Shift the balance of care to promote family-based care	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 27/28

Integrated Children's Services Plan [ICSP] Q3 23/24						
PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
% of Children and Young People in care in the community CP1.08 CHN09	AY 21/22	83.83 %	AY 22/23		89.26 %	HC update - due January provisional LGBF update - due July
No. of accommodated children and young people	M8 23/24	322	M9 23/24	321	314	
No. children needing to live away from the family home but supported in kinship care increases - Monthly	M8 23/24		M9 23/24	20.0 %	22.0 %	
No. of accommodated children and young people - residential	M8 23/24	53	M9 23/24	52	61	
No. Children in secure accommodation	M8 23/24	3	M9 23/24	4	3	
No. 'Promise Conversation Cafes' held each year - due to start reporting FY23/24	FY 21/22		FY 22/23		6	
Spend on Out of Authority accommodation	Q2 23/24		Q3 23/24	32 %		
The number of children and young people accommodated outwith Highland will decrease - Monthly	M8 23/24	13	M9 23/24	13	18	
The number of foster carer approvals - quarterly	Q2 23/24	2	Q3 23/24	2	3	

Protection Q3 23/24						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
% Adult Support Protection Referrals/Inquiries completed within 7 days	FY 21/22		FY 22/23			
Analysis of core themes from Highland Child Protection Dataset	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q1 24/25
% of child protection re-registrations within 18 months CHN22	FY 21/22	1.49 %	FY 22/23		7.75 %	HC update – due January provisional LGFB update – due July
Establish 4-yr pilot project re Non-Fatal Overdoses in Inverness CP1.09	Q2 23/24	Some Slippage	Q3 23/24	Some Slippage		Due to complete Q4 23/24
Implement the Scottish Child Interview Model in Highland	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q2 23/24
Increase training opportunities offered - due to start Q4 22/23	Q2 23/24	Some Slippage	Q3 23/24	Some Slippage		Ongoing
No. assessments for Bail Supervision	Q2 23/24	177	Q3 23/24	162	1	
No. individuals in community engaged with Non-Fatal Overdose Pathway Team Project - due to start FY23/24	Q2 23/24		Q3 23/24			
Uptake of specialist CP advice and guidance to health staff Qtr	Q2 23/24	534	Q3 23/24	335	500	

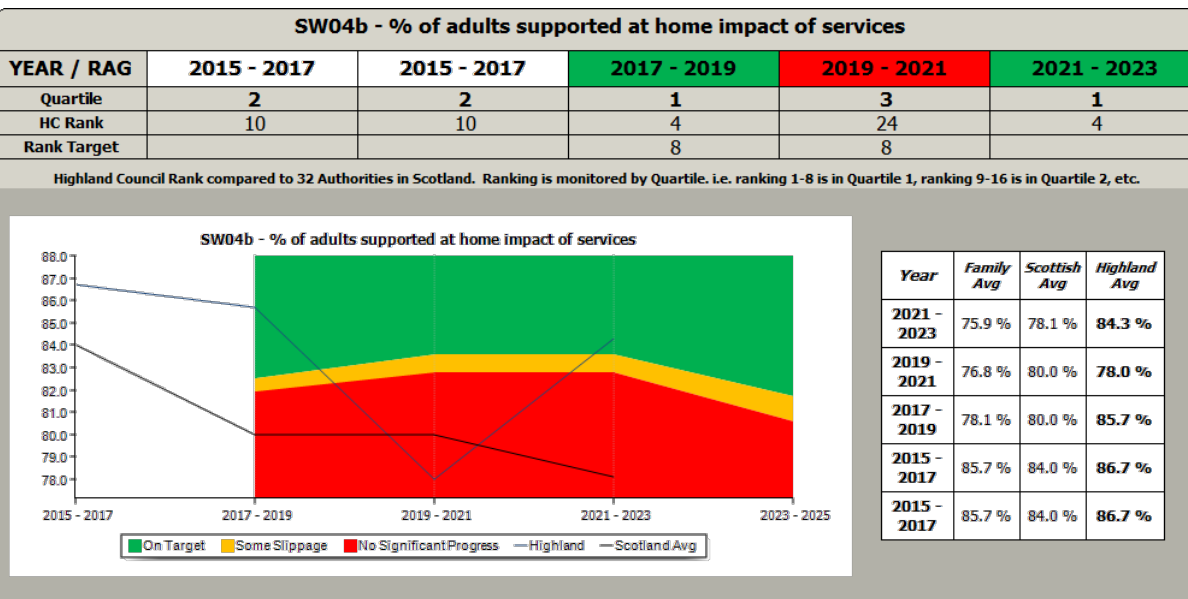
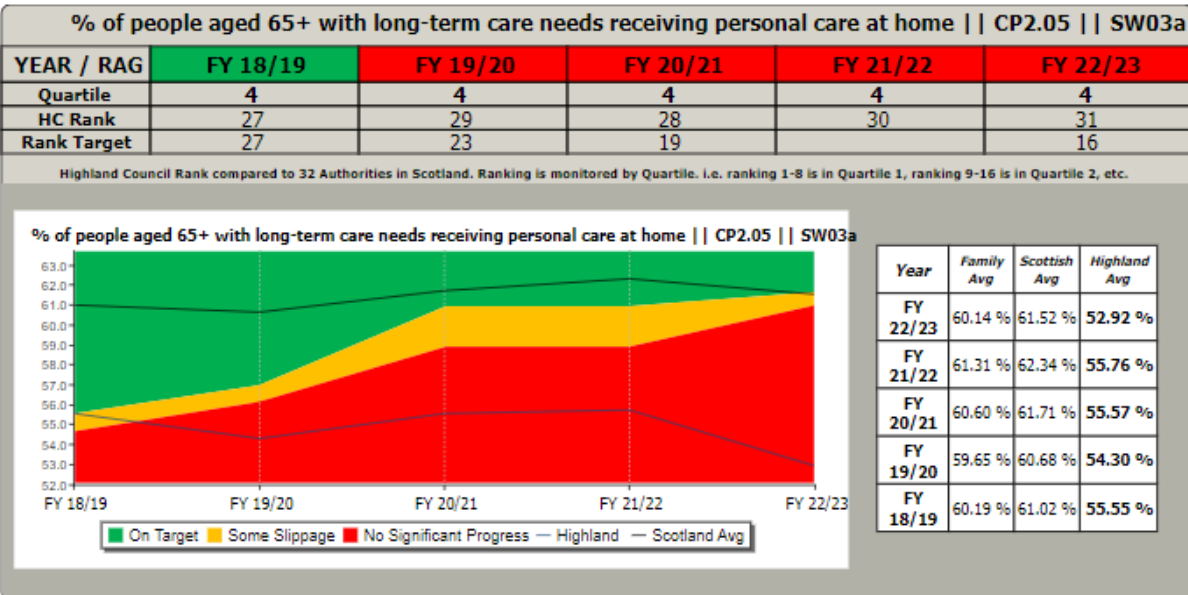
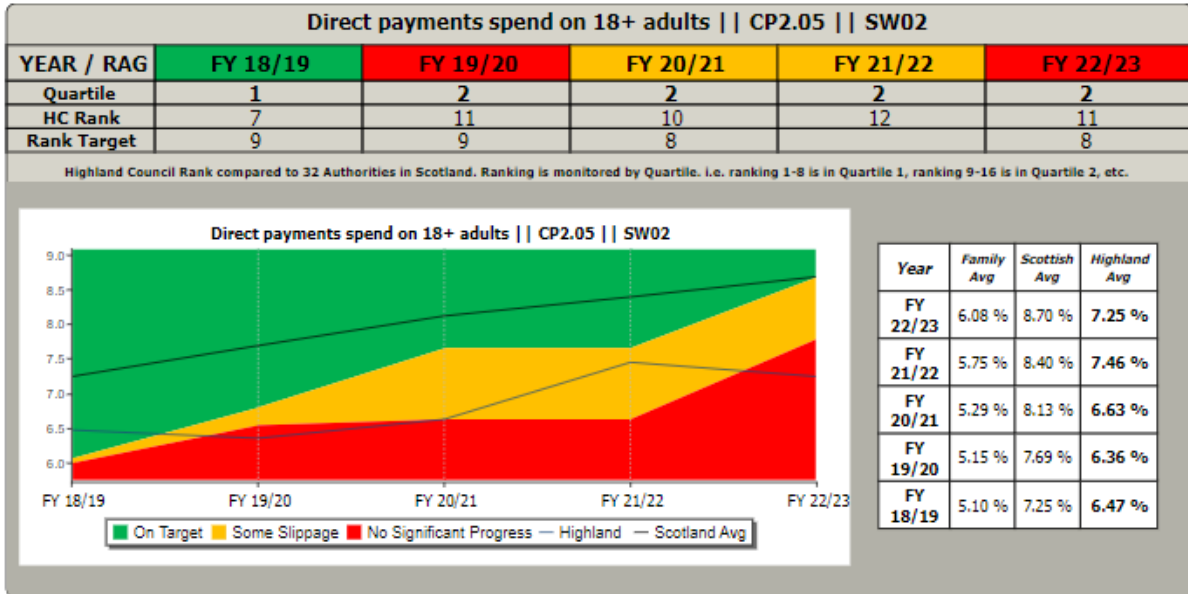
Quality Assurance Q3 23/24						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
Build business intelligence approach in HSC	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q2 24/15
Monitor the progress of the registered Service Improvement Plans and ensure the timelines are met	Q2 23/24	On Target	Q3 23/24	On Target		Ongoing
Utilise the PMF and business intelligence to support improvement - due to start Q3 22/23	Q2 23/24	Some Slippage	Q3 23/24	Some Slippage		Ongoing

Replace Social Work Case Management System Q3 23/24						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
Define the Target Operating Model [TOM] for SW case management system	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q3 23/24
Establish the programme to deliver the TOM for SW case management system	Q2 23/24	Some Slippage	Q3 23/24	Some Slippage		Due to complete Q2 24/25
Replace the current Case Management System for Social Work	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q4 24/25

Workforce Development Q3 23/24

Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/Update Date
No. of H&SC staff trained in Solihull Approach - begins 2023/24 CP1.08	FY 21/22		FY 22/23			
ERDs being completed - HSC CP5.01	Q2 23/24	On Target	Q3 23/24	On Target		
Create an implementation group for "Safe and Together"	Q2 23/24	Completed	Q3 23/24			Due to complete Q4 23/24
Develop the Grow Your Own Scheme to increase trainee opportunities	Q2 23/24	On Target	Q3 23/24	On Target		Due to complete Q1 24/25
Embed and grow the Social Work relief pool to cover all areas of Highland	Q2 23/24	On Target	Q3 23/24	On Target		Review by Q3 23/24
Ensure all new Criminal Justice staff are vetted to Level 2	Q2 23/24	Some Slippage	Q3 23/24	No Significant Progress		Due to complete Q4 23/24
Incentivise staff to become mentors and practice assessors	Q2 23/24	On Target	Q3 23/24	On Target		Ongoing
Mental Health Officer Posts Total FTE	Q2 23/24		Q3 23/24		21.00	
The AWI Waiting List - month	M8 23/24	14	M9 23/24	4	0	

Adult Social Care SPIs



Appendix 4: Service Risks

Risk No.	Risk Rating	Risk Name	Q3 Mitigation
HSC01	D2	Not Realising the Benefits of the Integration Scheme	On Target
HSC03	B2	Workforce Management	On Target
HSC06	D3	Young People's Transitions	On Target
HSC08	D2	Covid Inquiry	On Target
HSC09	D2	Historic Child Abuse Inquiry	On Target
HSC11	B2	Risk Around Not replacing Case Management System	No Significant progress
HSC13	B2	LSCMI Assessments	On Target
HSC14	B1	VISOR	Some Slippage
HSC15	C1	Care Inspectorate Inspections	Some Slippage

